Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Dep Form C-104 Revised 1-1-89 See Instructions

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

<u>.                                    </u>	TO TE	RANSPORT OIL	AND NATURAL GAS	Well A	Pl No.		<del></del>	
О <del>ревю</del> Kerr-McGee Corporat		30-005-20466						
Address One Marienfeld Plac	e, Suite 20	O, Midland,	TX 79701			<u></u>		
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator		in Transporter of:  Dry Gas  Condensate	Other (Please explain Flag-Redfern Oil Kerr-McGee Corp.	Co. wa		into	:	
		1 Co., P.O.	Box 11050, Midla	nd, TX	79702			
II. DESCRIPTION OF WELL								
Lease Name Hahn Federal		Weil No. Pool Name, Including Formation 1 Tom-Tom (San Andres)			Kind of Lease (Fed Lease No. 15677			
Location Unit LetterN	: 1980	Feet From The	Vest Line and 660	F~c	From The	South	Line	
Section 27 Townsh	nip 7S	Range 31E	, NMPM,		Chave	es	County	
III. DESIGNATION OF TRAN	NSPORTER OF	OIL AND NATU	RAL GAS					
Name of Authorized Transporter of Oil	or Cone		Address (Give address to which				ru)	
Lantern Petroleum Co	P. O. Box 2281, Midland, TX 79702							
	me of Authorized Transporter of Casinghead Gas  Sities Service Oil Company Oxy NGL And			Address (Give address to which approved copy of this form u to be sent) P. O. Box 300. Tulsa. OK 74102				
If well produces oil or liquids,					Sa. UK /41UZ When?			
give location of tanks.	N 27	j 7S j 31E	Yes	<u>L</u>	11/79			
If this production is commungled with that IV. COMPLETION DATA							-	
Designate Type of Completion	Oii₩ n-(X)	/ell   Gas Well	New Well   Workover	Deepes	Plug Back   Sar	ne Res'v	Diff Resiv	
Date Spudded	Date Compi. Ready	y to Prod.	Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay		Tubing Depth			
Perforations			Depth Casing Shoe			<u> </u>		
	TUBIN	G, CASING AND	CEMENTING RECORD	· · · · · · · · · · · · · · · · · · ·				
HOLE SIZE		TUBING SIZE	DEPTH SET		SACKS CEMENT			
							<del></del> -	
V. TEST DATA AND REQUE			h and to a mond to allow	mble for this	doub on he for	5.// 24 have	1	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	me oj loga ou ana mus	the equal to or exceed top allow Producing Method (Flow, pure			MI 24 ACA	73.)	
Length of Test	Tubing Pressure		Casing Pressure		Choke Size			
Actual Prod. During Test	Oil - Bbls.		Water - Bbia.		Gas- MCF			
GAS WELL			1		1			
Actual Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF		Gravity of Condensate			
Testing Method (pilot, back pr.)	Tubing Pressure (S	but-in)	Casing Pressure (Shut-in)		Choke Size			
VI. OPERATOR CERTIFIC I hereby certify that the rules and regr Division have been complied with an is true and complete to the beet of my	OIL CONSERVATION DIVISION  Date Approved AUG 8 1583							
Signature  Ivan D. Geddie	ByDISTRICT I SUPERVISOR							
Printed Name As of June 30, 1989	405/	ns. & Unit. Title 270-2124 Telephone No.	Title			-	<del></del>	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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